2002	Fo	or the year Jan. 1 - Dec. 31, 2002, or other tax year beginning , endin	ng		,				
FORM		Your first name and initial (if joint return, also give spouse's first name and initial) Last name	$\bigcap \Box$	Your social security number					
40NR	L A		Sp	Spouse's soc. sec. no. if joint return					
ONLY	B E L	Present home address (number and street or P. O. Box number)		FN (For official use only)					
Alabama Individual	H	PLACE LABEL HERE		FIN (FOI OIIICIAI USE OIIIY)					
Income	R	City, town or post office, state, and ZIP code							
Tax Return									
Filing Status	1	\$1,500 Single							
and Exemptions	2 3	©1 FOO Married filing congrets return Complete line F with angular's name and see and no			c. Sec. No ationship				
Check only one box	4	\$3,000 Head of family (with qualifying person). (See page 6 of instructions.) Complete line 5.							
	6	Wages, salaries, tips, etc. (list each employer and address separately). (Include spouse's income if married filing joint.) Ala.Ta	ax Withhe	ld	B All Sources		Alabama Incom	ne	
	a b			00	00	6a		00	
	C			00	00	6b 6c		00	
Income	7	Other income (from page 2, Part I, line 9)		7	00	7		00	
and Adjustments	8	Total income. Add amounts in column B then add amounts in column C, lines 6a-c and 7		8	00	8		00	
Aujustillellts	9	Adjustments to income (from page 2, Part II, line 5)		9	00	9		00	
	10	Adjusted total income. Subtract line 9 from line 8	L	10	00	10		00_	
	11 12	Alabama percentage of adjusted total income. Divide line 10, column C, by line 10, column Other Adjustments (from page 2, Part III, line 5)		ver 100	<i>%).</i>	11		% 00	
	13	Adjusted gross income. Subtract line 12 from line 10		13	00	13		00	
Deductions	14	Check appropriate box. If you itemize, enter amount from Schedule A, line 29.			ox a or b MUST be checked	_			
You Must Attach page		■ a Itemized Deductions ■ b Standard Deduction (see instr. page 8	3) ▶	14	00				
2 of Federal Form 1040, Federal Form	15	Federal income tax deduction (from page 2, Part IV, line 7)	🕨	15	00				
1040A, page 1 of 1040EZ, or a copy of	16	Personal exemption (multiply line 1, 2, 3, or 4 by percentage on line 11)	-	16	00				
your Telefile Schedule if claiming a deduction	17	Dependent exemption (from page 2, Part V, line 4)	L	17	00	40		00	
on line 15.	18 19	Total deductions. Add lines 14, 15, 16, and 17				18 19		00	
Tax	20a	Tax due. Enter here and check if from Tax Table or Form NOL-85A		20a	00	13			
Staple Form(s) W-2, W-2G, and/or 1099	b	Less credits from Schedule OC.		20b	00				
here.	21	Net tax due Alabama. Subtract 20b from 20a				21		00	
	22	Alabama income tax withheld (from column A, lines 6a-c)		22	00				
Payments	23	Amount paid with extension (attach Form 4868A)	· ·	23	00				
,	24 25	2002 estimated/composite tax payments (see page 9 of instructions)		24	00	25		00	
	26	If line 21 is larger than line 25, subtract line 25 from line 21, and enter AMOUNT YOU OW			CN	23			
AMOUNT		Place payment, along with Form 40V, loose in the mailing envelope. (FORM 40V MUST A		NY PA					
YOU OWE		If paying by credit card do not include Form 40V and check here			▶			00	
	27	Estimated tax penalty. Also include on line 26 (see instructions page 9)		27	00				
OVERPAID	28	If line 25 is larger than line 21, subtract line 21 from line 25 and enter amount OVERPAID		_	· · · · · · · · · · · · · · · · · · ·	28	DI EASE	00	
	29 30	Amount of line 28 to be applied to your 2003 estimated tax		29	opriate hoves)	-	• Verify your social		
Daniellan	а	Senior Services Trust Fund		- : :-	00		security number Recheck your m	nath	
Donation Chack offe	b	AL Nongame Wildlife Fund 00 e AL Breast & Cervical Ca			00		Sign return belo Attach W-2 form	n(s)	
Check-offs	С	AL Veterans Program	·						
	31	Total. Add lines 29, 30a, 30b, 30c, 30d, and 30e				31		00	
REFUND	32	REFUNDED TO YOU. Subtract line 31 from line 28. (CAUTION: You must sign this return	n before it	can be	processed.)	32		00	
D.		I authorize a representative of the Department of Revenue to discuss my return and			, i i				
Please		Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements and to the best of my knowledge and belief they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.							
Sign are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowled Here							ige.		
11016		Your signature Date Daytime Tel. No			Chaucala alematica (f filin - '	ointly DOTH		
			o. Date				ointly, BOTH must sig Preparer's SSN or PT		
Paid		Preparer's signature	- 410		Check if self-employed	'			
Preparer's		Firm's name (or			E.I. No.		<u>:</u>		
Use Only		yours, if self-employed) and address			ZIP Code				
_			_				AL4	1N0000	

1 Interest and divident income affachs (2004) 1 00 0	Form 40NR (2002)			.			• • • •	Page 2		
2	PART I						C — Alabama Sourc			
Standard Section Standard Se		-				1		00		
A Business income or (100x) (Attach Federal Scheduler C). 4			•							
Other		-								
PART IV						_				
Family F	Other					_				
PART	Income					_				
PART IV Total other income. Add lines 1 through 8, outurn 15, and lines 1, 4 through 8, outurn 15, and lines 1, 18 through 8, outurn 15, and 19, and	(see page 10)	7		7	00	7		00		
PART III 1 1 1 1 1 1 1 1 1		8	Other income (state nature and source)	8	00	8		00		
PART IV 1 1 If Adduction, Keggle etitionerer plan, and self-employed SEP deduction 1 0 0 1 0 0		9	Total other income. Add lines 1 through 8, column B, and lines 1, 4 through 8, column C.		- 00	ľ		00		
2			Enter here and also on page 1, line 7	9		9		00		
Adjustments to income to a page 1, 100	PART II	1	IRA deduction, Keogh retirement plan, and self-employed SEP deduction	1		1		00		
Part		2	Penalty on early withdrawal of savings	2	00					
Place of now employment. City	Adjustments	3	Moving Expenses (Attach Federal Form 3903)							
Selemployed health insurance deduction. 4			Place of new employment: City State ZIP	3	00	3		00		
PART III 1 Allmorp Pads 2 Adoption Expenses 3 Add lines 1 and 2, enter here and also page 1, line 12, column B. 3 Add lines 1 and 2, enter here and on page 1, line 12, column B. 4 Enter percentage from page 1, line 11 5 Multiply line 3 by line 4, Enter here and also page 1, line 12, column B. 4 Enter percentage from page 1, line 10, column B. 5 Multiply line 3 by line 4, Enter here and also page 1, line 12, column C. 5 Multiply line 3 by line 4, Enter here and also page 1, line 12, column C. 5 Multiply line 3 by line 4, Enter here and also page 1, line 12, column C. 6 Multiply line 3 by line 4, Enter here and also page 1, line 12, column C. 7 Line line service, Otherwise, omit lines 1 through 4, and lines 1 and 2, column B. 7 Enter here and also and lines 1 through 4, and lines 1 and 2, column B. 7 Enter line come Tax 8 Deduction 8 Add lines 1 and 2, column B. 8 Deduction	(see page 12)	4	Self-employed health insurance deduction	4	00	4		00		
Adojton Expenses Adojton Exp	. , , ,	5	Add lines 1 through 4. Enter here and also on page 1, line 9, columns B and C ▶	5	00	5		00		
Other Adjustments 3	PART III	1	Alimony Paid	1	00					
Adjustments Adjustments Multiply line 3 by line 4. Enter here and also page 1, line 12, column C		2	Adoption Expenses	2	00					
Adjustments 4 Enter percentage from page 1, line 11	Other	3	Add lines 1 and 2, enter here and on page 1, line 12, column B	3	00					
## PART V By value and fing separately on your Alexana return and jointly on your Federal return, complete all lines below. Otherwise, omit lines 1 through 4. 1 Adjusted total income (from page 1, line 10, columns B and C)		4	Enter percentage from page 1, line 11	4	%					
complete all lines below. Otherwise, omit lines 1 through 4. 1 Adjusted total income (from page 1, line 10, columns B and C)		5	Multiply line 3 by line 4. Enter here and also page 1, line 12, column C	5	00					
The complete all lines below. Otherwise, ornit lines 1 through 4. Adjusted tool income from a page 1, line 10, columns B and C)	PART IV		If you are filing separately on your Alabama return and jointly on your Federal return,	D. All Course	_					
Federal Income Tax Deduction (See Page 12) Add (line 1 and 2, column B. Celler percentage here and on line 6	IAILLIV		complete all lines below. Otherwise, omit lines 1 through 4.	B — All Source	!S		C — Alabama Sourc	ces		
Spouse's federal adjusted gross income		1		1	00	1		00		
Add lines 1 and 2, column B. Add lines 1 and 2, column B. Enter percentage here and on line 6 3 00		2		2	00					
Divide line 1, column C, by line 3, column B. Enter percentage here and on line 6.	Federal	3		3		1				
Deduction S	Income Tax	4				4		%		
Federal Income tax deduction allowable. Multiply the amount on line 1 Multiply the amount on line 5 by percentage on line 6. Enter here and on page 1, line 15. Total number of dependents of dependents claimed above. Last name	Deduction	5				<u> </u>				
PART VI PART VI PART VI Rederal income tax deduction allowable. Multiply the amount on line 5 by percentage on line 6. Enter here and on page 1, line 15	(see page 12)	6				_				
Multiply the amount on line 5 by percentage on line 6. Enter here and on page 1, line 15.		7				_				
See instructions for definition of a dependent. NOTE: If you checked filling status 3 (Married filling separate return), you may claim only the dependent(s) for whom you separately furnished over 50% of the total support. 1a						7				
dependent(s) for whom you separately furnished over 50% of the total support. 1a Dependents Dependents (1) First name Last name Scolal security number. (3) Dependent's Medionality to you. Multiply \$300 by the total number of dependents claimed above. 2 Multiply \$300 by the total number of dependents claimed and line 1b. 2 0.00	DADTV					only t	he			
Dependents: (1) First name Last name (2) Dependents (3) Dependents (3) Dependents (3) Dependents (4) Do not include (5) Do not include (7) Dependents (8) Dependents (8) Dependents (9) Dependents (1) First name (1) Pirst name (2) Dependents (3) Dependents (3) Dependents (4) Dependents (3) Dependents (4) Dependents (3) Dependents (4) Dependents (4) Dependents (5) Dependents (6) De	PANIV									
Composition		1a		(2) Dependent's	(2) Donard	ont's	(4) Did you provide			
Do not include yourself or your spouse b Total number of dependents claimed above. 2 Multiply \$300 by the total number of dependents claimed an line 1b				social security number.	relationship t	o you.				
Do not include yourself or your spouse b Total number of dependents claimed above. 2 Multiply \$300 by the total number of dependents claimed an line 1b	Dependents									
b Total number of dependents claimed above. 2 Multiply \$300 by the total number of dependents claimed on line 1b	•									
b Total number of dependents claimed above. 2 Multiply \$300 by the total number of dependents claimed on line 1b	Do not include									
Multiply \$300 by the total number of dependents claimed on line 1b	•	b	Total number of dependents claimed above							
See page 13 3 Enter percentage from page 1, line 11 3 9%	your spouse		'			2		00		
PART VI 1 Name of state of which you were a legal resident in 2002 2 Did you file a return with that state for 2002?	(see page 13)					3				
Enter here and on page 1, line 17		-						1		
1 Name of state of which you were a legal resident in 2002 2 Did you file a return with that state for 2002?		•			•	4		00		
2 Did you file a return with that state for 2002?	DADT VI	1						00		
If married, did your spouse receive a separate income for 2002?	PART VI									
If yes, is your spouse filing a separate Alabama return?		-	Did you lie a return with that state for 2002: 165 100 11 10, State reason willy.							
If yes, enter name here.		3	If married, did your spouse receive a separate income for 2002?							
If yes, enter name here.										
Information 4 Did you file an Alabama return for 2001? ☐ Yes ☐ No If no, state reason why: Sive name and address of your present employer(s). Yours: Your Spouse's:	General									
All Taxpayers Must Complete This Section (see page 13) Give name and address of your present employer(s). Yours: Your Spouse's: Enter the Adjusted Gross Income reported on your 2002 Federal Individual Income Tax Return If you are a shareholder or partner in an Alabama S Corporation or partnership which filed the Alabama Form 20SC or 65C, complete the following information: S Corporation's/Partnership's name Amount of payment made by the S Corporation or partnership on your behalf on the 20SC or 65C Composite Return Also, on line 24, page 1, enter this amount and write on the dotted line "20SC or 65C Composite Payment."	Information	4								
All Taxpayers Must Complete This Section 6 Enter the Adjusted Gross Income reported on your 2002 Federal Individual Income Tax Return		5								
This Section 6 Enter the Adjusted Gross Income reported on your 2002 Federal Individual Income Tax Return	All Taxpayers									
7 If you are a shareholder or partner in an Alabama S Corporation or partnership which filed the Alabama Form 20SC or 65C, complete the following information: S Corporation's/Partnership's name Amount of payment made by the S Corporation or partnership on your behalf on the 20SC or 65C Composite Return	•	6		urn		6		00		
complete the following information: S Corporation's/Partnership's name Amount of payment made by the S Corporation or partnership on your behalf on the 20SC or 65C Composite Return								1		
S Corporation's/Partnership's name FEIN Amount of payment made by the S Corporation or partnership on your behalf on the 20SC or 65C Composite Return	(see page 13)				,					
Amount of payment made by the S Corporation or partnership on your behalf on the 20SC or 65C Composite Return 7 00 Also, on line 24, page 1, enter this amount and write on the dotted line "20SC or 65C Composite Payment."			· · · · · · · · · · · · · · · · · · ·	FIN						
Also, on line 24, page 1, enter this amount and write on the dotted line "20SC or 65C Composite Payment."						7		00		
							I .	1 00		
		<u> </u>			AL 36132	-746	9			